Commonwealth of Virginia COVA Care and COVA HDHP Materials Order Form – April 2018

Page 1 of 2

Please destroy all prior order forms.

Email: covaandtlcmaterials@cms-mpc.com

<u>OR</u>

Fax: (855) 375-5354

Allow ten days for delivery of materials.

Date		
Name	Telephone	Email Address
Agency Number	Agency Name	
Shipping Address*	<u> </u>	
		*Orders cannot be delivered to P.O. Box addresses
Dlaw Information	☐ Check here If you ordered materials or	<u>n page 2</u> .
Plan Information		

Forms #	ltem	Quantity	Also available online at:
A10320	COVA Care Brochure		www.anthem.com/cova, select COVA Care under the Benefits tab
A10321	COVA HDHP Brochure		www.anthem.com/cova, select COVA HDHP under the Benefits tab
A10326	Getting to Know Your Benefits Brochure (coming soon)		www.dhrm.virginia.gov, select Health Coverage > Health Info under the tab For Employees
N/A	COVA Care and COVA HDHP Wallet Card		
A10152 (7/16)	COVA Care Member Handbook		www.dhrm.virginia.gov, select Health Coverage > Health Info under the tab For Employees
A10306 (12/17)	COVA HDHP Member Handbook		www.dhrm.virginia.gov, select Health Coverage > Health Info under the tab For Employees
T20716	Medicare Coordinating Plans Member Handbook – currently available online only		www.dhrm.virginia.gov, select Health Coverage > Health Info under the tab For Employees
T20940	Medicare Prescription Drug Benefits Insert – currently available online only		<u>www.dhrm.virginia.gov</u> , select Health Coverage > Health Info under the tab For Employees
A10112	Medicare Dental/Vision Benefits Insert – currently available online only		www.dhrm.virginia.gov, select Health Coverage > Health Info under the tab For Employees

See Page 2 for Plan Information materials.

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Name	
Agency Number and Name	<i>/</i>

Brochures / Forms

Forms #	Item	Quantity	Also available online at:
A10327	Eligibility and Active Enrollment Form for Employees		www.dhrm.virginia.gov, select Forms
T20878	Extended Coverage/COBRA Change Request	PDF only	www.dhrm.virginia.gov, select Forms
A10117	Retiree and VSDP/LTD Enrollment Form		www.dhrm.virginia.gov, select Forms
A10323	Flexible Benefits Sourcebook		www.anthem.com/cova, select Flexible Spending Account under the Benefits tab
A10161	Anthem EAP Brochure		www.anthem.com/cova
A10259	BlueCard Global Core Flier (when traveling outside Virginia)		www.anthem.com/cova
JAB14348	COVA Care Pharmacy Home Delivery Order Form		www.anthem.com/cova
12-0684	Pharmacy Claim Form		www.anthem.com/cova
110602	Anthem Claim Form		www.anthem.com/cova
N/A	Provider Directory (Printed by region. Please check box for your region.) □ Central □ Eastern □ Northern □ Western		www.anthem.com/cova, select Find a Doctor

For questions about materials ordered on this form, call (804) 354-3904.

Be sure to email (covaandtlcmaterials@cms-mpc.com) OR fax (855) 375-5354 both pages of the form.

For Delta Dental of Virginia materials, contact Marketing Administration at MktgAdmin@deltadentalva.com.

Please specify materials type (COVA Care or COVA HDHP) and the quantity for each order.